

CLAIMS ONLY						SERIAL NO.	FILING DATE		
						APPLICANT(S)			
						CLAIMS			
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
1									
2									
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30									
31	1								
32									
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34									
35									
36									
37									
38									
39									
40									
41	1								
42									
43									
44									
45									
46									
47									
48									
49									
50									
TOTAL IND.				↓					
TOTAL DEP.				←			↓		
TOTAL CLAIMS									
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS									

Best Available Copy